PART B - FEE(S) TRANSMITTAL Complete and send this form, together th applicable fee(s), to: Mail Mail Stop 1 E FEE Commissioner for Patents P.O. Box 1450 MAR 2 0 2006 Alexandria, Virginia 22313-1450 (571) 273-2885 or Fax INSTRUCTIONS: This soon should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate with further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless derivated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 24374 7590 12/19/2005 **VOLPE AND KOENIG, P.C.** Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. DEPT. ICC UNITED PLAZA, SUITE 1603/21/2006 EAYALEN2 00000071 090435 30 SOUTH 17TH STREET 01 FC:1501 PHILADELPHIA, PA 1910302 FC:1504 Berman Michael 300.00 DA 12.00 DA Wenna (Signature) 2006 (Date March APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/748,015 12/30/2003 I-2-0432.1US 6510 Christopher Cave TITLE OF INVENTION: SYSTEM AND METHOD FOR DETERMINING MEASUREMENT VALUE FOR RADIO RESOURCE MANAGEMENT IN WIRELESS COMMUNICATIONS APPLN. TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$1700 03/20/2006 \$300 **EXAMINER** ART UNIT **CLASS-SUBCLASS** FERRIS, DERRICK W 2663 370-335000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Volpe and Koenig, (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Wilmington, DE InterDigital Technology Corporation ☐ Individual ☐ Corporation or other private group entity ☐ Government 4b. Payment of Fee(s): 🛭 Issue Fee A check in the amount of the fee(s) is enclosed.

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March 15, 2006

Authorized Signature

Wenna

Typed or printed name Michael L. Berman

Registration No. 51,464

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Effective on 12/08/2004. RIVE es pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known			
			Application Number	10/748,015	10/748,015		
FEE TRANSMITTAL		Filing Date	December 30, 20	December 30, 2003			
For FY 2005			First Named Inventor	Cave et al.	Cave et al.		
			Examiner Name	Derrick W. Ferris			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	2663			
TOTAL AMOUNT OF PAYN	MENT ((\$) 1,712.00	Attorney Docket No.	I-2-0432.1US			
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 09-0435 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
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FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity Small Entity Small Entity Small Entity							
Application Type	Fee (\$)	Fee (\$) Fee (\$	<u>Fee (\$)</u> <u>F</u>	<u>ee (\$) Fee (\$) </u>	Fees Paid (\$)		
Utility	300	150 500		200 100			
Design	200	100 100	50	30 65			
Plant	200	100 300		60 80			
Reissue	300	150 500	250	300			
Provisional	200	100 0	0	0 0			
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entity Fee (\$) Fee (\$) 25 100 Multiple dependent claims							
Total Claims							
HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) O.00 HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Eee Paid (\$) - 100 = /50 = (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S)							

SUBMITTED BY					
Signature	Menan	Registration No. 51,464 (Attorney/Agent)	Telephone 215-568-6400		
Name (Print/Type) Michael L. Berman			Date March 15, 2006		

Non-English Specification, \$130 fee (no small entity discount) Other: Issue Fee; Publication Fee; Advance Copy Fee (4)

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